24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
GROW NC STRONG INC		C C00545152		
Check if 24-hour report 48-hour report New re	port Amends report f	filed on M M / D D / Y Y Y Y Y		
Full Name of Payee OnMessage Inc		Date of Public Distribution/Dissemination		
		10 28 7 2016		
Mailing Address 817 Slaters Lane		Amount		
City State	Zip Code	647278.00		
Alexandria VA	22314	Transaction ID : SE.4367 Date of Disbursement or Obligation		
Purpose of Expenditure TV Production and buy	Category/ Type	10 / 27 / 2016		
Name of Federal Candidate	Support	Office Sought: House District:		
ROSS, DEBORAH K, , ,	X Oppose	President X Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary		
Full Name of Payee		Date of Public Distribution/Dissemination		
OnMessage Inc		10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 817 Slaters Lane		Amount		
City State	Zip Code	361604.00		
Alexandria VA	22314	Transaction ID : SE.4369 Date of Disbursement or Obligation		
Purpose of Expenditure Radio production and buy	Category/ Type	10 27 2016		
Name of Federal Candidate	Support	Office Sought: House District:		
ROSS, DEBORAH K, , ,	X Oppose	President Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2016 Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		1008882.00		
(b) SUBTOTAL of Unitemized Independent Expenditures)			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.	•			
	onically Filed] Date	10 28 2016		
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	IN EXILIN	SITOTILO		PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FF	C IDENTIFICATION NUMBER ▼
GROW NC STRONG INC			C	
Check if 24-hour report 48-hour report	New re	eport Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee OnMessage Inc			M = N	
Mailing Address 817 Slaters Lane			Amount	28 2016
City	State VA	Zip Code	Transacti	50000.00 on ID : SE.4371
Alexandria Purpose of Expenditure Digital ad buy	VA	22314 Category/	Date of D	isbursement or Obligation
Name of Federal Candidate		TypeSupport	Office Sought:	27 2016 House District:
ROSS, DEBORAH K, , ,		X Oppose	President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1167215.32	Disbursement Fo	or: Primary x General (specify) ▶
Full Name of Payee Red Digital			Date of P	Public Distribution/Dissemination
Mailing Address P.O. Box 2512			Amount	21 2010
City	State	Zip Code 20195	Transactio	16666.66 on ID : SE.4373
Purpose of Expenditure Digital ad buy	• • • • • • • • • • • • • • • • • • • •	Category/		Disbursement or Obligation
Name of Federal Candidate		Support	Office Sought:	House District:
ROSS, DEBORAH K, , ,		X Oppose	President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1183881.98	Disbursement For 2016 Other	or: Primary
(a) SUBTOTAL of Itemized Independent Expendit	ures			66666.66
(b) SUBTOTAL of Unitemized Independent Exper	nditures		- -	7 1 7 1 7 1
(c) TOTAL Independent Expenditures			>	1075548.66
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or	idate or authorize			
West, Tommy, H., , Signature	[Electro	onically Filed] Date		28 2016